

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application : 10/774,962 Examiner : Kumar GAU : 3654
From : DP Location : (IDC) FMF FDC Date : 11/28/2005

Tracking # : EPN 10/774,962 Week Date : 8/11/2005

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM		<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input checked="" type="checkbox"/> OATH	<u>2/9/2004</u>	
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Residence address of Michael Jeffery Romine is missing from the oath/Declaration.

Thank you.

[XRUSH] RESPONSE: See misc comm

DONE

INITIALS: (Signature)

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04

FACSIMILE TRANSMITTAL

**EASTMAN KODAK COMPANY
PATENT LEGAL STAFF
343 STATE STREET
ROCHESTER, NEW YORK 14650-2201**

DATE: 12/22/05TO: Mr. Eric Berch
USPTO
Patenting DivisionFAX NO. (703) 746-6830FROM: Maria Langschultz
PHONE NO. (585) 477-7974FAX NO. (585) 477-4646

RE:

Mr. Berch
Per our telephone conversation of 12/22/05.Thank you

Total Pages Including Cover Sheet 3

87476F-P
Customer No. 01333

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Michael Jeffery Romine

SHEET DESKEWING METHOD
AND APPARATUS


Serial No. 10/774,962

Filed February 6, 2004

Group Art Unit: 3654

Examiner: Rakesh Kumar

I hereby certify that this correspondence was sent
to the United States Patent and Trademark Office by
facsimile transmission on the date below:



By: Mr. George

Date:

12/22/05

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE TO NOTICE TO FILE CORRECTED APPLICATION PAPERS

NOTICE OF ALLOWANCE MAILED

In response to the requirements of the Notice Applicant
hereby provides the address for the sole inventor Michael Jeffery Romine, which
is as follows:

1170 Rin Con Del Mundo
Escondido, California 92029 USA

The Commissioner is hereby authorized to charge any fees in
connection with this communication to Eastman Kodak Company Deposit
Account No. 05-0225.

Respectfully submitted,



Attorney for Applicants
Registration No. 53,950

Thomas J. Strouse/das
Rochester, NY 14650
Telephone: (585) 588-2728
Facsimile: (585) 477-4646

**UNITED STATES PATENT AND TRADEMARK OFFICE**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Serial Number
10774962

Date Mailed
12/8/05

NOTICE TO FILE CORRECTED APPLICATION PAPERS***Notice of Allowance Mailed***

This application has been accorded an Allowance Date and is being prepared for issuance. The application, however, is incomplete for the reasons below.

Applicant is given 30 days from the mail date of this Notice within which to correct the informalities indicated below. A failure to reply will result in the application being ABANDONED. This period for reply is NOT extendable under 37 CFR 1.136 (a) or (b).

- * Residence address on oath/declaration/ADS is missing for sole inventor (Michael Jeffery Romine).

APPLICANT MUST SUPPLY MISSING INFORMATION WITHIN 30 DAYS OF THE MAIL DATE OF THIS NOTICE.

A copy of this notice MUST be returned with the reply. Please address response to Commissioner for Patents P.O. Box 1450
Alexandria, VA 22313-1450

A handwritten signature in black ink, appearing to read "Rori Burch", is written over a horizontal line.

Rori Burch
USPTO
Publishing Division
Fax (703) 746-6830
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703-305-0333 ext. 135 (V)



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
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Bib Data Sheet

CONFIRMATION NO. 8771

SERIAL NUMBER 10/774,962	FILING OR 371(c) DATE 02/09/2004 RULE	CLASS 271	GROUP ART UNIT 3654	ATTORNEY DOCKET NO. 87476F-P
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APPLICANTS

Michael Jeffery Romine, Escondido, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
05/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Pamela R. Crocker
Patent Legal Staff
Eastman Kodak Company
343 State Street
Rochester, NY 14650-2201

TITLE

SHEET DESKEWING METHOD AND APPARATUS

FILING FEE RECEIVED 1070	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
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